

| POSITION                  | INITIALS           | ID NO.  | DATE     |
|---------------------------|--------------------|---------|----------|
| FEE DETERMINATION         | <i>[Signature]</i> |         | 05/15/01 |
| O.I.P.E. CLASSIFIER       | <i>[Signature]</i> | 32      | 820      |
| FORMALITY REVIEW          | 62                 | 763-883 | 05-27-01 |
| RESPONSE FORMALITY REVIEW |                    |         |          |

INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ..... Cancelled A ..... Appeal  
 + ..... Restricted O ..... Objected

09/928/77

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If more than 150 claims or 10 actions  
staple additional sheet here

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6/26  
05/10/01